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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
<u>.</u> .	- '		S-FILED Numn 1)	- PART I		SMALL ENTITY		OTHER THAN OR SMALL ENTITY			
_	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		1	1	SIVIALL	ENTIT	
BASIC FEE (37 CFR 1.16(a))		. INOWI	NOMBER MEED 140H		EREXIKA	RATE	FEE	ł	RATE	FEE	
TOT	AL CLAIMS		minute 20 -			x \$25 =	\$	OR		\$	
IND	CFR 1.16(c)) EPENDENT CLAI	MS	minus 20 °					OR	× \$ 50 =	ļ ·	
	CFR 1.16(b))	i	minus 3 = 1 ·			× \$ 100=	 	OR	× \$ 200 =		
MUL	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+\$180=		OR	+ \$360 <u>-</u>		
* If t	he difference in (column 1 is less th	nan zero, e	nter "0" in column	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED PART II											
4	4-7-06 (Column 1) (Column 2) (Column 3)						SMALL ENTITY		OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE	
DME	Total (37 CFR 1.16(c))	. 1/	Minus	" 20	=	× \$ 25 =		OR	x \$ 50_	1	
EN	Independent (37 CFR 1.16(b))	2	Minus	3	=	x \$ 100=		OR	x \$200=		
AM	FIRST PRESENT	TATION OF MULTIP	LE DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+ \$ 180=		OR	+\$ 360		
								OR	TOTAL		
		(Column 1)		(Column 2)	ADD'L FEE) Oik	ADD'L FEE	<u> </u>		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$ 25=	1 44	OR	x \$ <u>50</u> =	FEE	
	Independent (37 CFR 1.16(b))	•	Minus	***	<u> </u>	x \$ 100=	**	OR	× \$_200=		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$180=		OR	+ \$ 362		
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$25 =	,	OR	x \$ 50=	ree .	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$/00 =		OR	× \$200		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$180=		OR	+ \$360		
TOTAL TOTAL ADD'L FEE OR ADD'L FEE											
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 											

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